


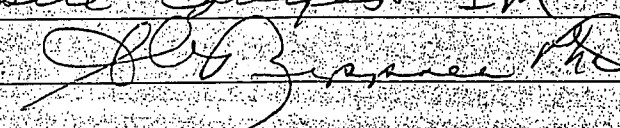
DATE	TIME	
9/4/07	1100	<p>Psychiatry follow-up PD: 11/2014</p> <p>slowly, more relaxed. less paranoid 'no longer matter' California Supreme court turned down his appeal, please help him with his 'cases' Had 6 months 'Real Time' in AD SEB, 'Don't want to shut myself in the fort any more no more.'</p> <p>Pleasantly animated. relevant associations readily formed. 'I have a letter path I want to go down for a change.' Proud of avoiding confrontation with staff in library. Has lost 23 lbs, vldy better in physical therapy, knee is mostly rehab'd</p> <p>AT? names called in sleep, on one occasion contacted cellie. sleep? up 2 AM, then returns. Appetite is okay.</p> <p>No SI, for HI. Paranoia is improved, no longer paranoid others comment. Doing well in school. Will be removed from farming, discussed. Good meal compliance.</p> <p>A: MDD with psychotic features, remains stable, PTSD, Hypo asthma, overweight</p> <p>P: continue, for now, to prepare for (Oxycontin), gabapentin 600 mg QID, paroxetine, diphenhydramine 100 mg (initial insomnia). return in 10 to 12 weeks. check labs next time.</p>
INSTITUTION	HOUSING UNIT	<p align="right"><i>B. J. M.D.</i></p> <p>CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH <i>B. J. M.D.</i> Cunningham, James V72323</p>

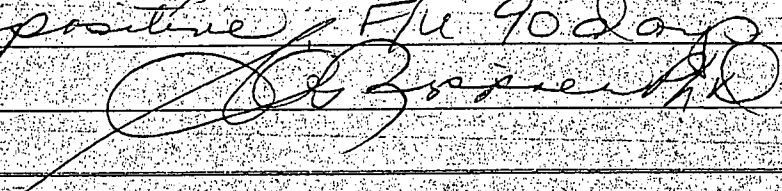
INTERDISCIPLINARY PROGRESS NOTES

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
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6/7/07 ~~unprovided (initial summary) return in 10 to 12 weeks.~~

 B. Sagerman, M.D.

6/6/07 ~~Psychology F/U: I/P is new to me having arrived when I was on extended medical leave 7358 of 1/17/07 error M.H.~~

8/17/07 Attempted F/U but unable to make contact w/ IM despite pages. IM will be rescheduled. 

8/21/07 IM/PT seen for 1:1 F/U - he has adjusted to program as well as school assignment; he is making high scores on tests/assignments. Mood/affect positive. F/U 90 days. 

INSTITUTION

CLINICIAN

BED NUMBER

CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, Turner

U72323

COMMENTS (USE S. O. A. P. E. FORMAT)

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
10/20/2017	1000	

1530

FM/PT seen for 90 day 1:1. Comes to session w/ smile and apology for being resistant/angry last session he not wanting to be in school. Has started class, enjoying it a lot, invested in learning happy to be productive. Explored heard example by anger he deals w/ and did some cog. behavioral TX re "shoulds" - able to laugh at self, understand thinking error & commit to fixing behavior re this. Mood/affect very good. Committed to improving life. F/U in 1 mo. *ABZinspire PhD*

INSTITUTION	CLINICIAN	BED NUMBER	CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)	
6/7/85	1935	Psychiatry followup: S/O. To see Dentist today for toothache. Has not had physical therapy to follow left knee arthroscopic surgery. Still has muscle cramps. Her regular MD is out 'with cancer.' School stresses. Agreed to stay with it, 'enjoy it' this week, with possibility of 'PIA, vascular disease' to improve TBSE. 'I wrestled with it.' 'I can't see going to the hole.' Shot myself in the foot with a 15' mine rocket. Good to get to Level 2, deal with nuclear issues. Good oral compliance. Sleep, Appetite are good. no SI, HI. All, patient? 'struggling that off.' side effects? Denies. Wants Digoxin/diuretic readily approved. Has completed Habers Corpus unit, accepted by Court. Family may visit. 'I have a lot to be cheerful about.' He is exercising. Linear thoughts. Mostly gramaal. Polite. Good oral compliance for MD. Weight: 268. WBS(S/O) in remission. A. MDD with psychotic features, stable PTSD. Acc C asthma. Weight 5/16/85. P continue gabapentin 600 mg (ADP/paranorm), bupropion 300 mg (depression), diphenhydramine 100 mg (CMTD).	
INSTITUTION	CLINICIAN	BED NUMBER	CDC NUMBER NAME (LAST, FIRST, MI) AND DATE OF BIRTH

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, - Jarner

V 72323

[illegible]

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, J.

V72322

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
4/24/07		C file review - RJDRC 4-4-05, SCC 7-8-05, Arrived CMC 1-12-07, EPRD 12-30-14. 4 yr + 8 yr = 12 yr term: Assault w/ firearm (9-12-04) 2 strikes
		Juv. HX from 1976 - last 115 10-22-06 Resolving Order
		Appears from Ccm investigation write up that the sentence was for threatening a neighbor w/ a shotgun - reads like off the wall even until you read IM's description which makes ^{more} sense - however trial was by jury so we concerned 12 others re their version.
		Chronos indicate some history of med. holding by checking '05 & '06
		TABE SCC 4.5 leading } 7-13-05 3.4 overall }
		SCC 6.2 L } 8-17-06 5.4 overall }
12-05 to 11-06		Prior school placement Chronos = + placement
INSTITUTION	CLINICIAN	BED NUMBER
		CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, J.

V72323

#3

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)	
4/19/07		IM/PT seen briefly in IDTT re school issue. Assigned CM has not yet evaluated IM/PT or reviewed UTR or Cfile. Appointment will be scheduled during coming week and IM/PT's academic status assessed. May be returned to IDTT for action if this is needed. <i>[Signature]</i>	
4/24/07	10:40-11:00	IM/PT seen 2° to academic issue. Cfile reviewed as well as UTR. IM/PT insists he shouldn't be in school - "50 yrs old", "never good at school", "need to move", "won't do anything for me or street." IM/PT suggests this assignment is "torture" for him & describes some anxiety symptoms - sweating, not liking it because people too close, however, primarily seems he just doesn't want to be in school & rejects offers to assist his adjustment w/ TX 1:1 group, meds. Appears <i>[Signature]</i>	
INSTITUTION	CLINICIAN	BED NUMBER	CDC NUMBER, NAME (LAST, FIRST MI) AND DATE OF BIRTH

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, J

V72323

[illegible]

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, James
V 72323

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
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1/1/07 - Unimpaired.

P. Re patient request with nurse
Diphenhydramine 100 mg for insomnia
Carbinoxamine 300 mg (depressant),
gabapentin 600 mg (anxiolytic, parietal)
return in 10 to 12 weeks.

1/12/07 9:45 AM By SMO
CCMS I/R (S) "I still have trouble
with school. I cannot stand to be
there. It really stresses me out
& makes me paranoid. I would like
to be anywhere else. - I have occasional
Sx of depression & am paranoid a lot
of the time." (D) compulsive, agitated, abul.
(D) MDD w/ psychotic features. Reports some
depression & reports on-going paranoia.
No Sx (P) Reports IOT to discuss his
school situation. (E) Discussed techniques
for managing conflicts w/ custody & Psy Dept.

S. Hadden CSW

INSTITUTION	CLINICIAN	BED NUMBER	CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH
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INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, James

V72323

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)	
3/30/07		<p>Improved: Mr. Delafleur, though he seems to understand my feedback that I've secured no clear psych indicators to remove him, currently keep current appointment. (Weight: 276 - increased, LABS 1/30 - sexual hr. may be 7'd consistent with other Hqs C).</p> <p style="text-align: right;">By JMD</p>	
4/1/07	9:35	<p>Psychiatry follow-up / Patient request (5/1/07) slt. He would like increased therapy, before nurse arrives which interferes with sleep.</p> <p>5/1/07 11:00 PM: taking the med with, helped well-being, him ordering, more motivation e.g. walking, writes letters, call, family. All, primary? occasionally, has been called (nurse), can ignore. He is H.I. sleep, appropriate chaz, 'a patient's perspective' want to lose weight. Plans to jump rope twice a day. LABS (1/30) m/b low increase cholesterol (Hqs C). weight: 276 nearly gained. pleasant interactions. Good contact. Good oral compliance per MAR. P. recurrent MDD with psychotic features, stable PTSD. App C. continue on weight (continued)</p>	
INSTITUTION	CLINICIAN	BED NUMBER	CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, James
V72373

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
3/30/07	10:20	<p>Psychology Drop in:</p> <p>Slv. Saw Mr. Haddleton. 'He said he was going to call me in, but he didn't, so I worked on it today.' Associates to problems with school - don't remember span (remembers about on ABC to contact family; Appeal, left once passed). Bed in school was noisy in kitchen, 'a stress relief.' 'I'm so, I'm not getting a degree soon. I've got 2 years to go.' 'I don't want to be in the hole.' Problem with med line MTA last weekend, told 'I've given them to you when I feel like it,' & did not get am/dam med. I didn't refuse them. 'He had my emotions moving high. He still called in the office.' MTA said patient was talking in the line. Got 'hot' mad when 'poker' med window closed on him, walked off, no confrontation. He has avoided that MTA, and still getting med. talks med well. no ST, HT, physical contact, linear thoughts. No more grooming. no behavior or mood changes.</p> <p>P: Oppose at discipline procedure, narrow, has solved own conflict issue for now. Hope</p> <p>P: He will drive some situation further notes (continued)</p>
INSTITUTION	CLINICIAN	BED NUMBER
		CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH

INTERDISCIPLINARY PROGRESS NOTES

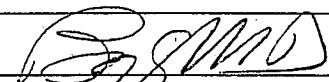
CDCR 7230.MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, James

V-72323

DATE	TIME	COMMENTS (USE S.O.A.P.E. FORMAT)
10/16/07	1055	<p>FLU re: Wellbutrin (for Dr. Sugerman)</p> <p>(S) "I'm upset about legal stuff"</p> <p>(O) Pt. has depression/anxiety re: "legal stuff" + "some paranoia". Denied AH, VH, SI, HL. We discussed at length - CMC - mandated OTC of Wellbutrin (if becomes nonformulary 11/1/07). Discussed changing his medication to Effexor XR - potential benefits/SE's. Pt. stated he would take Wellbutrin until it will no longer be available 11/1/07, but refused another antidepressant (briefly considered Prozac, then declined it, too). He signed a Request form, clearly stating he is aware Wellbutrin will be nonformulary (explained to him) + not available as of 11/1/07, but that he wants no other antidepressant medication.</p> <p>(A) MON T. psychosocial features PTSD</p> <p>(P) Pt. was encouraged to consider another antidepressant, & to let psych. services know if he changed his mind. Will ask that he be scheduled in ASAP to see his regular psychiatrist (after he returns in early Nov.) by E/11.</p> <p style="text-align: right;">B. J. Williams MD</p>
INSTITUTION		CLINICIAN
CMC-E		
BED NUMBER		CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH
INTERDISCIPLINARY PROGRESS NOTES		Cunningham, James
CDCR 7230 MH (Rev. 06/06)		V-72323
Confidential Client/Patient Information		2-16-58

DATE	TIME	
9/4/07	1100	Psychiatry follow-up PD: 11/2014 slowly, more relaxed. less paranoid 'no longer in the.' California Supreme Court turned down his Appeal, pens help him with his 'case' Had 6 months 'Real Time' in AD SEB, 'Don't want to start my self in the spot rather no more.' Pleasant, animated. relevant associations readily gained. 'I have a little path I want to go down for change.' Poor at avoiding confrontations with staff in library. Has lat 23lb3, vldy like in physical therapy, knee is mostly rehab'd AH? names called in sleep, on one occasion contacted cellie. Sleep? up 2AM; then returns. Appetite is okay. No SI, per HI. Paranoia is improved, no longer paranoid others comment. Doing well in school. Will begin being removed from family's presence. Good med compliance. A: MDD with psychotic features, remains stable PTSD Dep C asthma overweight P: continue, for now, to propion. Therapy (depression), gabapentin 600mg QID, paroxetine, diskenidamine 100mg (initial insomnia). return in 10 to 12 weeks. check labs next time.
INSTITUTION	HOUSING UNIT	CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH  E. J. S. M. German, M.D.

INTERDISCIPLINARY PROGRESS NOTES

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
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6/7/07 *unbrn'd. (initials) return in 10 to 12 weeks.*
B. Sugerman, M.D.

6/20/07 *Psychology F/U: I/P is new to me having arrived when I was on extended medical leave 7358 of 4/17/07 error*

8/17/07 *Attempted F/U but unable to make contact w/ IM despite pages. IM will be rescheduled*
[Signature]

8/21/07 *IM/PT seen for 1:1 F/U - he has adjusted to program as well as school assignments; he is making high scores on tests/assignments. Mood/affect positive. F/U 90 days*
[Signature]

INSTITUTION	CLINICIAN	BED NUMBER	CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH
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INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, Turner

U 72323

Cunningham

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
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6/7/07	1435	<p>Psychiatry Followup:</p> <p>S/O. To see Dentist today for toothache. Has not had physical therapy to follow left knee arthroscopic surgery. Still has muscle cramps. Has regular M.D. is ok 'with cancer'. School stresses? Agreed to stay with it, 'enjoy it' then work with possibility of 'P.D., vascular disease' to improve TRBE. 'I wrestled with it.' 'I can't see going to the hole, shot myself in the foot with a 15' more relaxed. Goal is to get to Level 2, deal with nuclear issues. Good mood compliance. Sleep, Appetite are good. on SI, HI. All, patient? 'struggling that off.' side effects? Nerves. Works Diphenhydramine readily expired. Has completed Habers Corpus unit, accepted by Court. Family may visit. 'I have a lot to be cheerful about.' He is exercising. Linear thoughts, neatly groomed. Dilute. Good mood compliance for MDR. Weight: 268. (PSS(SH) unremarkable</p> <p>A. MDD with psychotic features, stable</p> <p>PTSD. Hep C. Asthma. weight spl. balance</p> <p>P. carbamazepine 600 mg (A.D. parameters)</p> <p>lithium 300 mg (depression), diphenhydramine 100 mg</p>
INSTITUTION	CLINICIAN	BED NUMBER
		CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, Jarner

U 72323

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INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, J.

V72323

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
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4/24/07 C-file review - RSDRC 4-4-05, SCC 7-8-05,
 arrived CMC 1-12-07 EPRD 12-30-14.
 4 yr + 8 yr = 12 yr term: Assault w/ firearm
 2 strikes (9-12-04)

Juv. HX from 1976 - last 115 10-22-06
 Desobeying Order

It appears from Ccm investigation write up
 that the sentence was for threatening
 a neighbor w/ a shotgun - reads like
 off the wall even until you read IM's
 description which makes ^{more} sense - however
 trial was by jury so is concerned 12 others
 re their version.

Chronos indicate some history of med
 holding by checking '05 + '06

TABE SCC 4.5 leading } 7-13-05
 3.4 overall }

SCC 6.2 L } 8-17-06
 5.4 overall }

12-05 to 11-06 Prior school placement Chronos = + program

INSTITUTION	CLINICIAN	BED NUMBER	CDC NUMBER NAME (LAST, FIRST, MI) AND DATE OF BIRTH
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INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, J.

V72323

#3

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
4/19/07		IM/Rt seen briefly in IDTT re school issue. Assigned CM has not yet evaluated IM/Rt or reviewed UTR or Cfile. Appointment will be scheduled during coming week and IM/Rt's academic status assessed. May be returned to IDTT for action if this is needed. <i>St. Zuppan PhD</i>
4/24/07	10:40 11:00	IM/Rt seen 2° to academic issue. Cfile renewed as well as UTR. IM/Rt insists he shouldn't be in school. "50 yrs old", "never good at school", "need to move", "won't do anything for me or street." IM/Rt suggests this assignment is "torture" for him & describes some anxiety symptoms - sweating, not liking it because people too close, however, primarily seems he just doesn't want to be in school & rejects offers to assist his adjustment w/ TX 1:1, group, meds. Appears
INSTITUTION	CLINICIAN	BED NUMBER
		CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, J

V72323

DATE	TIME	COMMENTS (USE S, O, A, P, E, FORMAT)
4/5/07	10:45	<p>Psychiatry referral.</p> <p>S/O: Referred by his teacher that patient is not doing well + school environment, anxious, stated patient 'wants to do things right'. Per patient, 'it felt strange', 'Dunno exactly why + happy', 'couldn't sleep' or 'fun after hours much more comfortable working. Will have surgery on left knee meniscus in 6 weeks. No S.I.H.T., no A.H., no major outside of school setting. Per surgery. When thought appears anxious.</p> <p>A: Cognitive functions considered. Per psychiatric fragility. Seem to produce patient being in school at this time.</p> <p>P: Patient given copy - in to 4/11. Message left for Mr. Haddison to see patient, consider for assignment.</p> <p style="text-align: right;">B. Sugerman, M.D.</p>
INSTITUTION	CLINICIAN	BED NUMBER
CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH		

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, Turner

V 72323

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
4/2/07		Unchanged.
		P. Re patient request with increase Diphenhydramine to 100 mg for insomnia Carbamazepine 300 mg (depression), gabapentin 600 mg (ADHD symptoms) return in 10 to 12 weeks.
4/2/07	9:45 AM	By GMD CCCMs I/R (S) "He still having trouble with school. I cannot stand to be there. It really stresses me out & makes me paranoid. Should like to be anywhere else. - I have occasional Seizures depressed & am paranoid a lot of the time. (D) Compulsive, agitated, alert. (D) MDD w/psychotic features. Reports some depression & reports on-going paranoia. No SE (P) Reports EOT to discuss his school situation. (E) Discussed techniques for managing conflicts w/ custody & Psy Meds
		S. Needle (SA)

INSTITUTION	CLINICIAN	BED NUMBER	CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH
INTERDISCIPLINARY PROGRESS NOTES CDCR 7230 MH (Rev. 06/06) Confidential Client/Patient Information			Cunningham, James V72323

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
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3/30/07 - Improved: Mr. Hollister, though he seems to understand my feedback that there seemed no clear psych indicators to remove him, currently keep current appointment. (Weight: 276 - increased, LOS 1/30 - sexual in manner P'd consistent with old Hsp C).

By JMD

4/2/07 0935 - Psychiatry follow-up/patient request (3/26) s/o. He talks like normal. Boredom, before now anxiety which interferes with sleep. Taking the med well, helped. Wellbeing gives him energy, more motivation e.g. workouts, writes letters, call, family. A.H., previous? occasionally, has now called (nutriment), can ignore. He is H.I. sleep, possible to sleep, in patient's past time work to lose weight. Plans to jump rope twice a day. LOS (1/30) into low energy situation (Hsp C). weight 276 weekly, framed. relevant information. Good contact. Good mood (anxiety) for M.A.R. R. recurrent mild with psychiatric history, stable PTSD. Hsp C. asthma on account (continued)

INSTITUTION	CLINICIAN	BED NUMBER	CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH
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INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, James
V72373

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
3/30/07	10:20	<p>Psychiatry Drop in:</p> <p>S/O. Saw Mr. Helderson. 'He said he was going to call me in, but he didn't, so I waited on him today.' Associates to problems with school - poor attention span, comments about in ASU to contact family, appeal, left three pages. Bob in school was really in kitchen, 'a stress relief.' 'I'm so, I'm not getting a degree soon. I've got 2 years to go.' 'I don't want to be in the hole.' Problem with med line MTA last weekend, told 'I've given them to you when I feel like it,' so did not get any/much med. 'I didn't refuse them.' 'He had my emotions really high. He still called in the office.' MTA said patient was talking in the line. Got 'hot' mad when 'pushed med window' closed on him, walked off, no confrontation. He has avoided that MTA, and still getting meds. always med well. no S/L/H, Psychiatry contact. Lines of thought. No definite grooming. no obs/obs or man lib-btg.</p> <p>P: appears at discharge Psychiatry, man/wife, has said man contact issue for now. Hope P: He will discuss school situation further with (continued)</p>
INSTITUTION	CLINICIAN	BED NUMBER
CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH		

INTERDISCIPLINARY PROGRESS NOTES

CDCR 7230 MH (Rev. 06/06)

Confidential Client/Patient Information

Cunningham, James

V 72323

DATE	TIME	COMMENTS (USE S	P. E. FORMAT)
		IDTT:	
		Inmate was seen and evaluated by Interdisciplinary Treatment Team.	
		Treatment Plan and Mental Health Placement were reviewed and approved	
		as indicated on 7388 dated 1/17/02.	
		Team Recommends <u>CCMS</u> Placement.	
		S. Rippner, PhD	
		<i>S. Rippner</i> (signature)	
3/23/07		Psychiatry notes no shad, paged	
		<i>Darryl J. AM</i> (signature)	

INSTITUTION CMC-E	CLINICIAN S. Rippner, PhD	BED NUMBER 7268	CDCR NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH
<p align="center">INTERDISCIPLINARY PROGRESS NOTES</p> <p align="center">CDCR 7230-MH (Rev. 06/06)</p> <p align="center">Confidential Client/Patient Information</p>			<p>Last Name: CUNNINGHAM</p> <p>First Name: JAMES</p> <p>CDCR #: V72323</p> <p>DOB: 2/16/1958</p>

DATE	TIME	COMMENTS (USE S. O. A. P. E. FORMAT)
1/24/07	1:14 PM	UCC INITIAL CLASSIFICATION: I/M received from <u>SCC</u> for _____
		<input type="checkbox"/> P.C. 2684 Evaluation and Return <input type="checkbox"/> Mental health Treatment/Evaluation <input type="checkbox"/> Out To Court <input type="checkbox"/> Medical Treatment and Return <input type="checkbox"/> GP Housing <input type="checkbox"/> Developmental Disabilities Program
		Endorsed <input type="checkbox"/> PE <input type="checkbox"/> EOP <input checked="" type="checkbox"/> CCCMS <input type="checkbox"/> Medical Necessity <input type="checkbox"/> DD <input type="checkbox"/> GP
		Release date: <u>12/31/2014</u> Custody: <u>MAX MEDA</u> Custody Level: <u>III 30</u> PTS
		Work Group Status <u>D1/D RIDEK 12/17/05</u> T.A.B.E. <u>6.2</u>
		Assignment Wait Lists: <input checked="" type="checkbox"/> Support <input checked="" type="checkbox"/> Academic <input type="checkbox"/> Vocation <input type="checkbox"/> Project Change <u>ADD 12/17/05</u>
		<input checked="" type="checkbox"/> PIA <input type="checkbox"/> Developmental Disabilities Education Program <input type="checkbox"/> None
		Controlling Offense: <u>MT TELM ASSAULT & FIRE ARM - 12 YR</u>
		Criminal History:
		Disciplinary History:
		Gang Affiliations: <u>UP TOWN BLOOD</u>
		Medical Issues: <u>ASTHMA</u>
		Sex Offenses:
		PIA Preclusions:
		Visiting Restrictions: <u>0</u>
		Comments:

DCLW0EHL, CALW
Q

INSTITUTION CMC-E	CLINICIAN	BED NUMBER 6264X	CDCR NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH	
INTERDISCIPLINARY PROGRESS NOTES CDCR 7230-MH (Rev. 06/06) Confidential Client/Patient Information			Last Name:	First Name:
			CUNNINGHAM	JAMES
			CDCR #	DOB
			V72323	2/16/1958

[illegible]

COMMENTS (USE S.O.A.P.E. FORMAT)

Follow-up: Age: 49 PD: 2014
 about 10 years. Why in MHSS?
 sleep: onset 2004, initial: Halperin ST,
 , despair, hypotension, poor energy, anhedonia,
 tration, remitted, persisted weeks. Prior
 similar in length, symptoms, than 10 years - had
 atypical symptoms with VLT. When driving, violent,
 nesses. ~~1st 2003~~. convicted of ADW 2004.
 began an order. Also, had fight with peer, then
 hole, politics. He is "Blood" "I could go back there
 to." Has friends on the yard knew from San
 SE, HI. no psychiatric contact. Family: Pysar Ho -
 expressive, vented. At times has flashbacks, hyper-
 street violence. "I'm tired & ready for the Devil."
 meth, cannabis (insulted). Damaged left knee
 10 years. well developed, neatly groomed.
 socialization: - Greeting: helps sleep, in AM (Annuella
 or private: Benadryl helps breath, sleep.
 exercise - calisthenics, walks laps. weight: 273
 grooming. relevant misadventures.
 , recurrent moods with PTSD elements.
 Asthma (chronic)

BED NUMBER

CDC NUMBER, NAME (LAST, FIRST, MI) AND DATE OF BIRTH

State of California, Department of Corrections-Institution: SCL

Prior Page Number: _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES:

All Staff, Clinicians, Treatment Teams.

Date/Time	Use Name & Title Stamp
1/17/07	CCAMS-N/A (8) "cli a little depressed + I have a lot of paranoia. I was jumped at another prison by a couple of guys + I think it's going to happen again. Also I'm not sleeping. I just can't go to sleep. I think about suicide once in a while but I never tried to kill myself. I'm not thinking about suicide now. I came here from SCG because of problems I was having with other inmates there. My crime was ADJ + my EPO is 2014. I've got good relations with my mother + my kids. I think that I have improved my life + I'm taking more responsibility for my behavior. (C) appeared stable, focused, coherent, + pleasant. (A) Depressive s/p, NBS + Psychotic s/p NBS. Has some depression + reports that he continues to be very paranoid. (P) Intensive CCAMS. He attends one group for self-esteem. It is recommended that he also be in a 12 step oriented group for his ETOH problem.
	St. Hubert

<p>MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES</p> <p>MH 3 [3/21/96]</p> <p>Confidential Client/Patient Information See W & I Code, Section 5328</p>	<p>LEVEL OF CARE</p> <p>Inpatient</p> <p>Outpatient</p>	<p>Last Name: First Name MI</p> <p>Cunningham James</p> <p>CDC# V 72323</p> <p>DOR 2/6/58</p>
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CMC

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : ____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.
 SCC Weekly Summary of Psych Tech Clinical Rounds ASU/OHU

Jan	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date: 2007	7	8	9	10	11	12	13
Suicidal Ideation	None Noted Mild Serious	None Noted Mild Serious	None Noted Mild Serious	None Noted Mild Serious	None Noted Mild Serious	None Noted Mild Serious	None Noted Mild Serious
Mood	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic
	Angry	Angry	Angry	Angry	Angry	Angry	Angry
	Elated	Elated	Elated	Elated	Elated	Elated	Elated
	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious
	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed
	Sad	Sad	Sad	Sad	Sad	Sad	Sad
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Affect	Broad	Broad	Broad	Broad	Broad	Broad	Broad
	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted
	Flat	Flat	Flat	Flat	Flat	Flat	Flat
	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent
	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted
	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Orientation	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4
Cooperation	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi
Sleep	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Appetite	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Hygiene	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Med Compliant?	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A
Current MHSDS Status:	<input checked="" type="checkbox"/> CCCMS <input type="checkbox"/> EOP <input type="checkbox"/> MHCB			Current Placement: <input type="checkbox"/> ASU <input checked="" type="checkbox"/> OHU			
Referral	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA
Signature							
Weekly Summary	<p><i>Transferred to another facility</i></p> <p><i>1-8-07</i></p> <p><i>428</i></p>						

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE Inpatient Outpatient	Last Name: <u>Cunningham</u> First Name: <u>V.</u> MI: <u>72323</u> CDC# <u>72323</u> DOB <u>1/1</u>

cmc

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.
 SCC Weekly Summary of Psych Tech Clinical Rounds ASU/OHU

Jan	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date: 2007	7	8	9	10	11	12	13
Suicidal Ideation	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted
	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious
Mood	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic
	Angry	Angry	Angry	Angry	Angry	Angry	Angry
	Elated	Elated	Elated	Elated	Elated	Elated	Elated
	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious
	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed
	Sad	Sad	Sad	Sad	Sad	Sad	Sad
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Affect	Broad	Broad	Broad	Broad	Broad	Broad	Broad
	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted
	Flat	Flat	Flat	Flat	Flat	Flat	Flat
	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent
	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted
	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Orientation	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4
Cooperation	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi
Sleep	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Appetite	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Hygiene	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Med Compliant?	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A	am yes no noon yes no pm yes no hs yes no N/A yes no N/A
Current MHSDS Status:	<input checked="" type="checkbox"/> CCCMS <input type="checkbox"/> EOP <input type="checkbox"/> MHCB			Current Placement: <input type="checkbox"/> ASU <input checked="" type="checkbox"/> OHU			
Referral	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA
Signature							
Weekly Summary	<p>Transferred to another facility 1-8-07 428</p>						

MENTAL HEALTH
 INTERDISCIPLINARY PROGRESS NOTES

MH 3 [3/21/96]

Confidential Client/Patient Information
 See W & I Code, Section 5328

LEVEL OF
 CARE

Inpatient
 Outpatient

Last Name: First Name: MI:

Cunningham

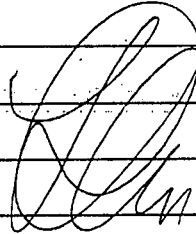
CDC # V-72.323 DOB 1/1

A.07

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.

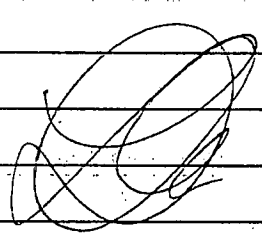
Date/Time:	Use Name & Title Stamp.	
1-5-07	ADMINISTRATIVE SEGREGATION CASE MANAGER WEEKLY ASSESSMENT/NOTE	
Appearance	<input checked="" type="checkbox"/> WNL	
Behavior	<input checked="" type="checkbox"/> WNL	
Mood	<input checked="" type="checkbox"/> WNL	
Sleep	<input checked="" type="checkbox"/> WNL	
Appetite	<input checked="" type="checkbox"/> WNL	
Affect	<input checked="" type="checkbox"/> WNL	
Suicidality	<input checked="" type="checkbox"/> None noted or stated	
Hallucinations	<input checked="" type="checkbox"/> None	
Delusions	<input checked="" type="checkbox"/> None	
Medications	<input checked="" type="checkbox"/> Helpful	
Referral to psychiatrist needed <input type="checkbox"/>		
Progress of identified problems/needs/issues (see MH2)		
COMMENTS: Seen at cell front: Doing fine no problems to report. Appeared alert and cheerful. Declined an individual visit; transferring on Mon.		
 L. Allen, Ph.D. Staff Psychologist Sierra Conservation Center		
Page # _____		

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE CCCMS EOP Outpatient	Last Name: First Name: MI:
		Cunningham CDC # <u>V.72323</u> DOB <u>1/1</u>

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : ____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.

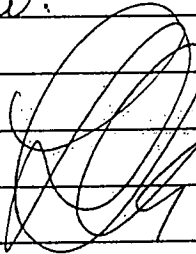
Date/Time:	Use Name & Title Stamp.
12-29-06	ADMINISTRATIVE SEGREGATION CASE MANAGER WEEKLY ASSESSMENT/NOTE
Appearance	<input checked="" type="checkbox"/> WNL
Behavior	<input checked="" type="checkbox"/> WNL
Mood	<input checked="" type="checkbox"/> WNL
Sleep	<input checked="" type="checkbox"/> WNL
Appetite	<input checked="" type="checkbox"/> WNL
Affect	<input checked="" type="checkbox"/> WNL
Suicidality	<input checked="" type="checkbox"/> None noted or stated
Hallucinations	<input checked="" type="checkbox"/> None
Delusions	<input checked="" type="checkbox"/> None
Medications	<input checked="" type="checkbox"/> Helpful
Referral to psychiatrist needed <input type="checkbox"/>	
Progress of identified problems/needs/issues (see MH2)	
COMMENTS: Seen at cell front: Doing fine, no problems to report. Opened alert and calm. Accepted an individual visit.	
 L. Allen, Ph.D. Staff Psychologist Sierra Conservation Center	
Page #	

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES	LEVEL OF CARE	Last Name:	First Name:	MI:	
MH 3 [3/21/96]	CCCMS	Cunningham			
Confidential Client/Patient Information See W & I Code, Section 5328	EOP				
	Outpatient	CDC #	V.72323	DOB	1/1

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : ____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.

Date/Time:	Use Name & Title Stamp.
12-27-06	ADMINISTRATIVE SEGREGATION CASE MANAGER WEEKLY ASSESSMENT/NOTE
Appearance	<input checked="" type="checkbox"/> WNL
Behavior	<input checked="" type="checkbox"/> WNL
Mood	<input checked="" type="checkbox"/> WNL
Sleep	<input checked="" type="checkbox"/> WNL <i>pon</i>
Appetite	<input checked="" type="checkbox"/> WNL
Affect	<input checked="" type="checkbox"/> WNL
Suicidality	<input type="checkbox"/> None noted or stated
Hallucinations	<input checked="" type="checkbox"/> None
Delusions	<input checked="" type="checkbox"/> None
Medications	<input type="checkbox"/> Helpful
Referral to psychiatrist needed	<input checked="" type="checkbox"/>
Progress of identified problems/needs/issues (see MH2)	
COMMENTS:	
<i>Doing better. Received letters and pictures of family. Also received needed legal paperwork. Will see psychiatrist tomorrow.</i>	
 L. Allen, Ph.D Staff Psychologist Sierra Conservation Center	
Page #	

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH.3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE	Last Name:	First Name:	MI:
	CCCMS	<i>Cunningham, James</i>		
	EOP	CDC # <i>V-72323</i>		
	Outpatient	DOB <i>1/1/</i>		

State of California, Department of Corrections – Institution: SCC

Prior Page Number : _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.
SCC : **Weekly Summary of Psych Tech Clinical Rounds** **ASU/OHU**

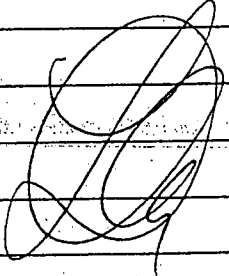
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date: DEC 2006	17	18	19	20	21	22	23
Suicidal Ideation	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted
	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious
Mood	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic
	Angry	Angry	Angry	Angry	Angry	Angry	Angry
	Elated	Elated	Elated	Elated	Elated	Elated	Elated
	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious
	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed
	Sad	Sad	Sad	Sad	Sad	Sad	Sad
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Affect	Broad	Broad	Broad	Broad	Broad	Broad	Broad
	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted
	Flat	Flat	Flat	Flat	Flat	Flat	Flat
	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent
	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted
	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Orientation	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4
Cooperation	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi
Sleep	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Appetite	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Hygiene	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Med Compliant?	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A
Current MHSDS Status:	<input checked="" type="checkbox"/> CCCMS <input type="checkbox"/> EOP <input type="checkbox"/> MHCB			Current Placement: <input checked="" type="checkbox"/> ASU <input type="checkbox"/> OHU			
Referral	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA
Signature	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
Weekly Summary	12/23/06 11m shows no S/S of acute mental health decompensation. KC						

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328.	LEVEL OF CARE Inpatient Outpatient	Last Name: Cunningham	First Name:	MI:
		CDC # Y-72323	DOB 1-4-07	<i>[Signature]</i>

State of California, Department of Corrections – Institution: SCC

Prior Page Number : ____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.

Date/Time:	Use Name & Title Stamp.	
12-22-08	ADMINISTRATIVE SEGREGATION CASE MANAGER WEEKLY ASSESSMENT/NOTE	
Appearance	<input checked="" type="checkbox"/>	WNL
Behavior	<input checked="" type="checkbox"/>	WNL
Mood	<input checked="" type="checkbox"/>	WNL
Sleep	<input checked="" type="checkbox"/>	WNL
Appetite	<input checked="" type="checkbox"/>	WNL
Affect	<input checked="" type="checkbox"/>	WNL
Suicidality	<input checked="" type="checkbox"/>	None noted or stated
Hallucinations	<input checked="" type="checkbox"/>	None
Delusions	<input checked="" type="checkbox"/>	None
Medications	<input checked="" type="checkbox"/>	Helpful
Referral to psychiatrist needed <input type="checkbox"/>		
Progress of identified problems/needs/issues (see MH2)		
COMMENTS: <i>Seen at cell front. Doing fine, no problems to report. Appeared alert and calm. Accepted an individualized print.</i>		
 L. Allen, Ph.D. Staff Psychologist Sierra Conservation Center		
Page #		

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES	LEVEL OF CARE	Last Name:	First Name:	MI:
MH 3 [3/21/96]	CCCMS	Cunningham		
Confidential Client/Patient Information See W & I Code, Section 5328	EOP			
	Outpatient	CDC #	72323	DOB 1/1

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.
 SCC Weekly Summary of Psych Tech Clinical Rounds ASU/OHU

DEC	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date: 2006	10	11	12	13	14	15	16
Suicidal Ideation	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted
	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious
Mood	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic
	Angry	Angry	Angry	Angry	Angry	Angry	Angry
	Elated	Elated	Elated	Elated	Elated	Elated	Elated
	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious
	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed
	Sad	Sad	Sad	Sad	Sad	Sad	Sad
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Affect	Broad	Broad	Broad	Broad	Broad	Broad	Broad
	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted
	Flat	Flat	Flat	Flat	Flat	Flat	Flat
	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent
	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted
	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Orientation	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4
Cooperation	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi
Sleep	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Appetite	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Hygiene	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Med Compliant?	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A
Current MHSDS Status:	<input checked="" type="checkbox"/> CCCMS <input type="checkbox"/> EOP <input type="checkbox"/> MHCB			Current Placement: <input checked="" type="checkbox"/> ASU <input type="checkbox"/> OHU			
Referral	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA
Signature	F	F	F	KC	F	KC	RO
Weekly Summary	12/16/06 1/m is responsive stable & in no acute mental health distress - & Care LPA						

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE Inpatient Outpatient	Last Name: First Name: MI: Cunningham CDC # V. 72323 DOB

CMC

State of California, Department of Corrections -- Institution: SCC

Prior Page Number: _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.
 SCC Weekly Summary of Psych Tech Clinical Rounds ASU/OHU

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date: 12/31/06	31	1	2	3	4	5	6
Suicidal Ideation	None Noted Mild Serious	None Noted Mild Serious	None Noted Mild Serious	None Noted Mild Serious	None Noted Mild Serious	None Noted Mild Serious	None Noted Mild Serious
Mood	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic
	Angry	Angry	Angry	Angry	Angry	Angry	Angry
	Elated	Elated	Elated	Elated	Elated	Elated	Elated
	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious
	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed
	Sad	Sad	Sad	Sad	Sad	Sad	Sad
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Affect	Broad	Broad	Broad	Broad	Broad	Broad	Broad
	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted
	Flat	Flat	Flat	Flat	Flat	Flat	Flat
	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent
	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted
	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Orientation	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4
Cooperation	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi
Sleep	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Appetite	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Hygiene	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Med Compliant?	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A
Current MHSDS Status:	<input checked="" type="checkbox"/> CCCMS <input type="checkbox"/> EOP <input type="checkbox"/> MHCB			Current Placement: <input checked="" type="checkbox"/> ASU <input type="checkbox"/> OHU			
Referral	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA
Signature							
Weekly Summary	1/6/07 1/m IS stable & shows NO acute m.h. distress - KC						

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE Inpatient Outpatient	Last Name: <u>Cunningham</u>	First Name: <u>MI:</u>
		CDC # <u>V72323</u>	DOB <u>1-07</u>

State of California, Department of Corrections — Institution: SCC

Prior Page Number: _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.
SCC **Weekly Summary of Psych Tech Clinical Rounds** **ASU/OHU**

DEC	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date: 2406	24	25	26	27	28	29	30
Suicidal Ideation	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted
	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious
Mood	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic
	Angry	Angry	Angry	Angry	Angry	Angry	Angry
	Elated	Elated	Elated	Elated	Elated	Elated	Elated
	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious
	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed
	Sad	Sad	Sad	Sad	Sad	Sad	Sad
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Affect	Broad	Broad	Broad	Broad	Broad	Broad	Broad
	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted
	Flat	Flat	Flat	Flat	Flat	Flat	Flat
	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent
	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted
	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Orientation	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4
Cooperation	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi
Sleep	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Appetite	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Hygiene	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Med Compliant?	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A
Current MHSDS Status:	<input checked="" type="checkbox"/> CCCMS <input type="checkbox"/> EOP <input type="checkbox"/> MHCB			Current Placement: <input checked="" type="checkbox"/> ASU <input type="checkbox"/> OHU			
Referral	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA
Signature	F	F	F	KC	F	DM	DM
Weekly Summary	12/30/07 - 11m alert, responsive, and appears in no acute mental distress. fms						

**MENTAL HEALTH
 INTERDISCIPLINARY PROGRESS NOTES**
 MH 3 [3/21/96]
 Confidential Client/Patient Information
 See W & I Code, Section 5328.

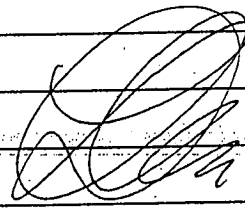
**LEVEL OF
 CARE**
 Inpatient
 Outpatient

Last Name: **Cunningham**
 First Name: **MI**
 CDC # **V-72323** DOB **1-17-07**

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : ____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.

Date/Time:	Use Name & Title Stamp.	
12-15-06	ADMINISTRATIVE SEGREGATION CASE MANAGER WEEKLY ASSESSMENT/NOTE	
Appearance	<input checked="" type="checkbox"/> WNL	
Behavior	<input checked="" type="checkbox"/> WNL	
Mood	<input checked="" type="checkbox"/> WNL	
Sleep	<input checked="" type="checkbox"/> WNL	
Appetite	<input checked="" type="checkbox"/> WNL	
Affect	<input checked="" type="checkbox"/> WNL	
Suicidality	<input checked="" type="checkbox"/> None noted or stated	
Hallucinations	<input checked="" type="checkbox"/> None	
Delusions	<input checked="" type="checkbox"/> None	
Medications	<input checked="" type="checkbox"/> Helpful	
Referral to psychiatrist needed	<input type="checkbox"/>	
Progress of identified problems/needs/issues (see MH2)		
COMMENTS: Seen at cell front: Doing fine, no problems to report. Appeared alert and calm. Accepted an individual visit.		
		
Page #		

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE CCCMS EOP Outpatient	Last Name: <u>Cunningham</u> First Name: _____ MI: _____ CDC # <u>V-72323</u> DOB <u>1/1</u>

State of California Department of Corrections & Rehabilitation
Sierra Conservation Center Progress Note

Date: 12/11/2006 Time: 1:30 PM EPRD: 11/4 Controlling Case:

S: Patient ID: 4870 ☐ Single ☐ Married ☐ Common Law ☐ Divorced; Children:

HPI & Complaints: [source of information is the patient]

Sleep Problem: ☒ None ☐ Getting to sleep ☐ Staying asleep ☐ Early waking ☐ NightmaresAppetite: ☒ Normal ☐ Increased ☐ Decreased; Energy Level: ☐ Normal ☐ Increased ☐ DecreasedMood: ☒ Normal ups and downs ☐ Increased anxiety ☐ Frequent changes from too euphoric to toodepressed ☐ Hopeless ☐ Helpless ☐ Feelings of worthlessness ☐ Preoccupation with death ☐ Passive S/I ☐ Active S/I ☐Suicide Plan ☐ Tearful ☐ Worries about health ☐ Poor concentration ☐ Racing thoughts ☐ Difficulty controlling anger

Stressors:

*I have reported he is doing well but is not getting his weed but he wanted it. He is 100 K-y*Drug History: Alcohol Abuse: ☐ Yes ☐ No; D.O.C.: ☐ Cocaine ☐ Heroin ☐ Marijuana ☐ Methamphetamine ☐ PCPAllergies ☐ NKDA; Seizure d/o: ☐ Yes ☐ NoCurrent Psych Medications: ☐ None ☐ Abilify ☐ Benadryl ☐ Celexa ☐ Depakote ☐ Effexor XR ☐ Elavil ☐ Geodon/☐ Lexapro ☐ Lithium ☐ Paxil ☐ Prozac ☐ Remeron ☐ Risperdal ☐ Serenell ☐ Trazodone ☐ Tenex ☐ Vistaril☐ Wellbutrin ☐ Zoloft ☐ ZyprexaSide Effects: ☐ Yes ☐ NoSuicide History: ☐ Denies h/o any past suicide attempt;

O: Mental Status Exam

Appearance ☒ Average, well formed physically ☐ Obese ☐ Poorly groomed
☐ Facial tattoo, PiercingBehavior ☒ Cooperative ☐ Appropriately friendly ☐ reserved ☐ AvoidantEye Contact ☒ Normal ☐ PoorSpeech ☒ Normal rate, volume, latency, and tone ☐ Rapid, pressured speech ☐ Slow
☐ increased paucityMotor ☒ Without Involuntary movements ☐ PMA ☐ PMR ☐ tremor

AIMS SCORE

Mood today is ☒ Euthymic ☐ Dysphoric ☐ Dysthymic ☐ EuphoricAffect ☐ Full range ☐ Constricted ☐ Blunted ☐ Flat☒ Mood congruent ☐ Mood IncongruentThought Processes ☒ Goal directed, linear ☐ Tangential ☐ Circumstantial ☐ L.O.A.Thought Perception ☒ No Delusions ☐ Delusions ☐ IllusionsThought Content ☒ No Hallucinations ☐ A.H. ☐ V.H.Suicidal Ideation ☒ Denies, currently stable, NO SI ☐ SI☐ Intent ☐ Means ☐ PlanHomicidal Ideation ☒ Denies any, at present-time, None evident ☐ HI☐ Intent ☐ Means ☐ PlanInsight ☒ Good ☐ Limited ☐ PoorJudgment ☒ Good ☐ Limited ☐ Poor

LAB RESULTS:

ASSESSMENT

Axis I *Depression d/o 10/05*Axis II ☐ Deferred

Axis III

Axis IV Incarceration Yrs: Mos: ☐ Uncertain about date of parole.Axis V Current GAF = *58*PLAN ☐ Labs Ordered

RTC:

☐ Continue current psych med regimen ☐ Revise current psych med regimen☐ Patient noted to show improvement and progress on current medications.

Rationale for revision / continuing:

PATIENT EDUCATION

☐ Medication Informed Consent Obtained☐ Patient educated about the nature of his mental illness; risks, benefits, and alternatives to treatment options, most common and serious side effects discussed including but not limited to carbohydrate metabolism and potential suicidality.☐ sleep hygiene ☐ compliance ☐ relapse prevention☐ Patient refuses psych meds, does not meet criteria for Keyhea, & Med Refusal form is in file.

Print Name: MICHAEL W. MADDOX, M.D.

Signature:

*Michael W. Maddox, MD*MENTAL HEALTH
INTERDISCIPLINARY PROGRESS NOTES
MH 3 [26 March 2006]Confidential Client/Patient Information
See W & I Code, Section 5328

LEVEL OF CARE:

☐ Inpatient☒ OutpatientName: *CUNNIBETH, JAMES*

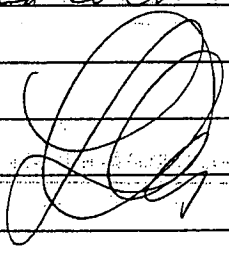
DOB: 2-16-58

CDC # *172323*Date: *12-11-06*

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : ____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.

Date/Time:	Use Name & Title Stamp.
12-8-06	ADMINISTRATIVE SEGREGATION CASE MANAGER WEEKLY ASSESSMENT/NOTE
Appearance	<input checked="" type="checkbox"/> WNL
Behavior	<input checked="" type="checkbox"/> WNL
Mood	<input checked="" type="checkbox"/> WNL
Sleep	<input checked="" type="checkbox"/> WNL
Appetite	<input checked="" type="checkbox"/> WNL
Affect	<input checked="" type="checkbox"/> WNL
Suicidality	<input checked="" type="checkbox"/> None noted or stated
Hallucinations	<input checked="" type="checkbox"/> None
Delusions	<input checked="" type="checkbox"/> None
Medications	<input checked="" type="checkbox"/> Helpful
Referral to psychiatrist needed	<input type="checkbox"/>
Progress of identified problems/needs/issues (see MH2)	
COMMENTS:	Seen at cell front: Doing fine, no problems to report. Appeared alert and calm. Accepted an individual visit.
	
	L. Allen, Ph.D. Staff Psychologist Sierra Conservation Center
	Page #

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE CCCMS EOP Outpatient	Last Name: First Name: MI: Cunningham CDC # V.72323 DOB / /

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.
 SCC Weekly Summary of Psych Tech Clinical Rounds ASU/OHU

Dec	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date: 2006	3	4	5	6	7	8	9
Suicidal Ideation	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted
	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious
Mood	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic
	Angry	Angry	Angry	Angry	Angry	Angry	Angry
	Elated	Elated	Elated	Elated	Elated	Elated	Elated
	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious
	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed
	Sad	Sad	Sad	Sad	Sad	Sad	Sad
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Affect	Broad	Broad	Broad	Broad	Broad	Broad	Broad
	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted
	Flat	Flat	Flat	Flat	Flat	Flat	Flat
	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent
	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted
	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Orientation	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4
Cooperation	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi
Sleep	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Appetite	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Hygiene	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Med Compliant?	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A
Current MHSDS Status:	<input checked="" type="checkbox"/> CCCMS <input type="checkbox"/> EOP <input type="checkbox"/> MHCB			Current Placement: <input checked="" type="checkbox"/> ASU <input type="checkbox"/> OHU			
Referral	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA
Signature	CC	CC	CC	CC	CC	CC	CC
Weekly Summary	12/6/06 in stable cooperative & in no acute m.H. distress - K. Counselor PT						

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE Inpatient Outpatient	Last Name: <u>Cunningham</u>	First Name: _____	MI: _____
		CDC # <u>V-72323</u>		
		DOB <u>1/1</u>		

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.
SCC **Weekly Summary of Psych Tech Clinical Rounds** **ASU/OHU**

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
NOV-Dec.							
Date: 2006	11/26	11/27	11/28	11/29	11/30	12/1	12/2
Suicidal Ideation	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted
	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious
Mood	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic
	Angry	Angry	Angry	Angry	Angry	Angry	Angry
	Elated	Elated	Elated	Elated	Elated	Elated	Elated
	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious
	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed
	Sad	Sad	Sad	Sad	Sad	Sad	Sad
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Affect	Broad	Broad	Broad	Broad	Broad	Broad	Broad
	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted
	Flat	Flat	Flat	Flat	Flat	Flat	Flat
	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent
	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted
	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Orientation	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4
Cooperation	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi
Sleep	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Appetite	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Hygiene	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Med Compliant?	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A
Current MHSDS Status:	X CCCMS <input type="checkbox"/> EOP <input type="checkbox"/> MHCB			Current Placement: X ASU <input type="checkbox"/> OHU			
Referral:	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA
Signature	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
Weekly Summary	<p>Scheduled for IDT 11-29</p> <p>Scheduled for IAC 11/30/06 & CC</p> <p>12/2/06 I'm stable - In no acute mental distress at this time. I'm really OK</p>						

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE Inpatient Outpatient	Last Name: CUNNINGHAM	First Name:	MI:
		CDC # V-72323	DOB 11-06	<i>[Signature]</i>

Clinical Summary Outline for ICCInstitution Name: SCE

Housing, prior to AD/SEG: _____

1. Inmate Name and CDC#	<u>Cunningham V72323</u>
2. Date placed in AD/SEG	
3. a. Documented reason(s) for placement in AD/SEG	<u>Safety</u>
b. Inmate's perception of incident	
4. Type of Review (circle one)	114-D Review <u>Initial ICC</u> 30-day Review RVR
5. Single cell/Double cell suitability (circle one)	Single cell <u>Double cell</u>
6. a. Apparent ability to understand Due Process, including the disciplinary and classification process (circle one)	<u>Yes</u> No Unable to determine
b. Needs staff assistant.	Yes <u>No</u>
7. MHSDS current Level Of Care (circle one)	Non-patient <u>CCCMS</u> EOP MHCB
8. Date first included in the MHSDS	
9. Response to treatment (circle one)	Poor Fair <u>Good</u> <u>Medication complaint</u> non-complaint Unable Unwilling
10. Behavioral Alerts	Suicidal behavior/risk Assaultive behavior/risk Vulnerable (likely to be victimized) ADL adequate Needs assistance
11. IDTT Recommendation for Level of Care (circle one)	Non-patient <u>CCCMS</u> EOP MHCB
12. Prognosis for stabilization, if AD/SEG placement continues (circle one)	Poor Guarded Fair <u>Good</u>
13. IDTT Recommendation for alternative placement (circle one)	CCCMS (GP) <u>L4 EOP</u> PSU DMH
14. IDTT Recommendation--Other	

ICC date and action: 1/30/06 Hold pending transferInmate behavior during ICC and response to ICC action: Agitated, angry, understood, finally agreed

Next ICC scheduled for: _____

ICC decision overruled IDTT recommendation for alternative placement. Special Review is scheduled for: _____

Clinician's Name: AlferSignature: [Signature]Date: 1-30-06

ASU INTERDISCIPLINARY TREATMENT TEAM REVIEW

DATE: 11-29-06**Members present:**

(☒) L. Allen, Ph.D.
 (☒) Maddox, MD, Psychiatrist
 (☐) R. Otto, Ph.D.
 (☐) L. Brady, LPT
 (☐) L. Day, LPT
 (☒) Inmate attended
 (☒) C/O Hope
 (☒) CC Esquer
 (☐) CCII

Reason for Review:

(☒) Initial Review
 (☐) Treatment Plan Review
 (☐) Annual Review
 (☒) Case Review
 (☐) Program Removal
 (☐) AD SEG Placement
 (☐) Other: _____

Administrative Segregation Issues (if applicable)

Date of AD SEG Placement: _____ Initial ICC Date: _____ Next ICC Date: _____
 Reason for Placement: _____

Current AD SEG Disp: _____

Pertinent Case Factors Discussed: (☐) Treatment Plan Reviewed and Signed

Team Input/Recommendations: (☐) Not Applicable

Action Plan: (☐) See Treatment Plan

Other: ICC Common

(☐) Appropriate Chrono Completed

Next Review Date: (☐) _____

Clinical Case Manager: (circle one) L. Allen, Ph.D. None

INMATE: Cunningham

Signature: [Signature]

NUMBER: V2323

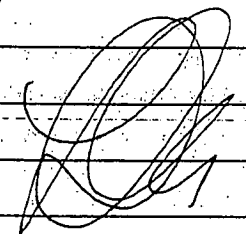
IDTT AdSeg.doc

<p align="center">MENTAL HEALTH</p> <p align="center">INTERDISCIPLINARY PROGRESS NOTES</p> <p align="center">MH 3 [3/21/96]</p> <p align="center">Confidential Client/Patient Information See W & I Code, Section 5328</p>	<p>LEVEL OF CARE</p> <p>CCCMS</p> <p>EOP</p> <p>Outpatient</p>	<p>Last Name: First Name: MI:</p> <p align="center"><i>Cunningham, Jane</i></p> <p>CDC # <u>V-72323</u> DOB <u>1/1</u></p>

State of California, Department of Corrections -- Institution: SCC

Prior Page Number : ____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.

Date/Time:	Use Name & Title Stamp.	
11-28-06	ADMINISTRATIVE SEGREGATION CASE MANAGER WEEKLY ASSESSMENT/NOTE	
Appearance	<input type="checkbox"/> WNL	eyes are very red
Behavior	<input checked="" type="checkbox"/> WNL	
Mood	<input checked="" type="checkbox"/> WNL	
Sleep	<input type="checkbox"/> WNL	poor
Appetite	<input checked="" type="checkbox"/> WNL	
Affect	<input checked="" type="checkbox"/> WNL	
Suicidality	<input checked="" type="checkbox"/> None noted or stated	
Hallucinations	<input checked="" type="checkbox"/> None	
Delusions	<input checked="" type="checkbox"/> None	
Medications	<input type="checkbox"/> Helpful	
Referral to psychiatrist needed	<input checked="" type="checkbox"/>	
Progress of identified problems/needs/issues (see MH2)		
COMMENTS:		
Wants a med adjustment. Will refer to psychiatrist tomorrow. Basically doing very well. Will go to ICC this week.		
 L. Allen, Ph.D. Staff Psychologist Sierra Conservation Center		
Page #		

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE CCCMS EOP Outpatient	Last Name: First Name: MI: Cunningham, James CDC # <u>V-72323</u> DOB <u> / / </u>
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State of California, Department of Corrections -- Institution: SCC

Prior Page Number : _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.
 SCC Weekly Summary of Psych Tech Clinical Rounds ASU/OHU

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date: Nov 2006	19	20	21	22	23	24	25
Suicidal Ideation	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted	None Noted
	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious	Mild Serious
Mood	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic	Euthymic
	Angry	Angry	Angry	Angry	Angry	Angry	Angry
	Elated	Elated	Elated	Elated	Elated	Elated	Elated
	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious	Anxious
	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed	Depressed
	Sad	Sad	Sad	Sad	Sad	Sad	Sad
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Affect	Broad	Broad	Broad	Broad	Broad	Broad	Broad
	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted	Restricted
	Flat	Flat	Flat	Flat	Flat	Flat	Flat
	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent	Incongruent
	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted	Blunted
	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile	Hostile
	WNL	WNL	WNL	WNL	WNL	WNL	WNL
Orientation	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4	X1 X2 X3 X4
Cooperation	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi	yes no semi
Sleep	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Appetite	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Hygiene	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor	good fair poor
Med Compliant?	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A	am yes no noon yes no pm yes no hs yes no N/A
Current MHSDS Status:	<input checked="" type="checkbox"/> CCCMS <input type="checkbox"/> EOP <input type="checkbox"/> MHCB			Current Placement: <input checked="" type="checkbox"/> ASU <input type="checkbox"/> OHU			
Referral	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA	MD CM MTA
Signature			KCPH				KCPH
Weekly Summary	Arrived in Ad-SEb late 10/20/06 4D 11/23/06 @ AM well but in states locked in AM to go to 7. Sum otherwise in no acute mental distress. ce 1/2						

MENTAL HEALTH
 INTERDISCIPLINARY PROGRESS NOTES
 MH 3 [3/21/96]

Confidential Client/Patient Information
 See W & I Code, Section 5328.

LEVEL OF
 CARE

Inpatient
 Outpatient

Last Name: First Name: MI:

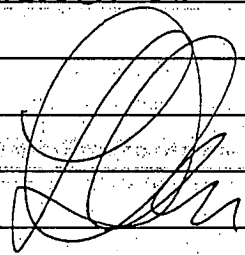
Cunningham

GDC # V-72323 DOB 1/1

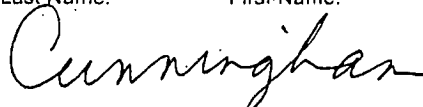
State of California, Department of Corrections -- Institution: SCC

Prior Page Number : _____

CHRONOLOGICAL INTERDISCIPLINARY PROGRESS NOTES: All Staff, Clinicians, Treatment Teams.

Date/Time:	Use Name & Title Stamp.
1/22/06	ADMINISTRATIVE SEGREGATION CASE MANAGER WEEKLY ASSESSMENT/NOTE
Appearance	<input checked="" type="checkbox"/> WNL
Behavior	<input checked="" type="checkbox"/> WNL
Mood	<input checked="" type="checkbox"/> WNL
Sleep	<input checked="" type="checkbox"/> WNL
Appetite	<input checked="" type="checkbox"/> WNL
Affect	<input checked="" type="checkbox"/> WNL
Suicidality	<input checked="" type="checkbox"/> None noted or stated
Hallucinations	<input checked="" type="checkbox"/> None
Delusions	<input checked="" type="checkbox"/> None
Medications	<input checked="" type="checkbox"/> Helpful
Referral to psychiatrist needed	<input type="checkbox"/>
Progress of identified problems/needs/issues (see MH2)	
COMMENTS:	Seen at cell front: Doing fine, no problems to report. Appeared alert and calm. Accepted an individual visit.
	
	L. Allen, Ph.D. Staff Psychologist Sierra Conservation Center

Page #

MENTAL HEALTH INTERDISCIPLINARY PROGRESS NOTES MH 3 [3/21/96] Confidential Client/Patient Information See W & I Code, Section 5328	LEVEL OF CARE CCCMS EOP Outpatient	Last Name: First Name: MI:  CDC # <u>V-72323</u> DOB <u>1/1/</u>
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